PART B—IS	SUE FES TRAN	SMITTA		
Commission and wall this form together with my sales fore to	*		24x -	leleo .
Complete and mail this form, together with ap,able fees, to: Box ISSUE FEE Assistant Commission		iner for Patents 541 - 30		
	ashington, D.C. 20		, ce (	
			**	•
IAILING INSTRUCTIONS: This form should be used for transmitting the IS	CITE EEE Blooks 1			<del> </del>
rough 4 should be completed where appropriate. All further correspondence in eceipt, the Patent, advance orders and notification of maintenance fees will be prrespondence address as indicated unless corrected below or directed other becifying a new correspondence address; and/or (b) indicating a separate aintenance fee notifications.	cluding the Issue Fee mailed to the curren wise in Block 1, by (a	Mote: The certificate of mallings of the Issue Fe for any other accompaniassignment or formal dr	e Transmittal. This ce ying papers. Each add	ly be used for domestic prificate cannot be used litional paper, such as an wn certificate of mailing.
JRRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use B	lock 1)	┥ .		•
THE PARTY OF THE CONTROL ASSISTANCE PROPERTY OF THE PARTY	I hereby certify that this issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mall in an envelope addressed to the Box issue Fee address above on the date Indicated below.			
RECEIVED				
PUBLISHING DIVI	sion	Sio data indicatos bolo.	••	
1 Total & 17 Total Late (1970)			- 1	
225 FRANKLIN STREET JUN 2 5 19	198	105/01	1. Arci	(Depositors name)
BOSTON MA 02110-2804 \		(7)79		, / .
16		Kesley	J- Ment	(Signature)
10		6.22.	98	(Date)
. APPLICATION NO. FILING DATE TOTAL CLA	AIMS	EXAMINER AND GROU	P ART UNIT	DATE MAILED :
08/963.512 11/03/97 026	CANGIALO	S1, S	3642	03/20/98.
First Named KIRBY, ALA Applicant	N J.			
LEOFTRANSFERRING ENCRYPTED PACKETS O' JENTION	VER A PUBL	IC NETWORK		
'ATTY'S DOCKET NO. CLASS-SUBCLASS BATCH NO.	APPLN, TYPE	SMALL ENTITY	FEE DUE	, DATE DUE
2 07644/004001 380-049.000 B	91 UTILI	TY YES	\$660.00	06/22/98
Change of correspondence address or indication of "Fee Address" (37 CFR 1.36 Use of PTO form(s) and Customer Number are recommended, but not required.    Change of correspondence address (or Change of Correspondence Address for Change of C	(1) the names attorneys or a	on the patent front page, list of up to 3 registered pater gents OR, alternatively, (2 a single firm (having as	nt 1 Fish & I	Richardson P.C.
PTO/SB/122) attached.	member a re	gistered attorney or agen		
☐ "Fee Address" Indication (or "Fee Address" Indication form PTO/SB/47) attach		s of up to 2 registered pater sents, if no name is listed, n		
name will be pr			3	
I. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT PLEASE NOTE: Unless an assignee is identified below, no assignee data will ap inclusion of assignee data is only appropiate when an assignment has been preventee PTO or is being submitted under separate cover. Completion of this form is iffiling an assignment.	pear on the patent.	4a. The following fees are of Patents and Tradem  ☑ Issue Fee  ☑ Advance Order - # o	arks):	c payable to Commissioner
(A) NAME OF ASSIGNEE	. <u>L</u>			
RAPTOR SYSTEMS, INC. (B) RESIDENCE: (CITY & STATE OF COUNTRY)	b. The following fees or deficiency in these fees should be charged to:			

4b. The following fees or deficiency in these fees should be charged to: DEPOSIT ACCOUNT NUMBER  $06\!-\!1050$ (ENCLOSE AN EXTRA COPY OF THIS FORM)

X Issue Fee

Advance Order - # of Copies

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature) July .

Waltham, MA 02154

6/224

NOTE; The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Please check the appropriate assignee category indicated below (will not be printed on the patent)

Accorporation or other private group entity

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

06/29/1998 CASHBY 00000086 08963512

01 FC:248 02 FC:561

660,00 09 30,00 00

TRANSMIT THIS FORM WITH FEE

85B (REV.10-96) Approved for use through 06/30/99. OMB 0651-0033

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE